South Carolina DEPARTMENT OF HEALTH AND HUMAN SERVICES Post Office Box 8206

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September 8, 2010

ALL

MEDICAID BULLETIN

TO: **FAMILY PLANNING WAIVER PROVIDERS**

- SUBJECT: I. Centers for Medicare and Medicaid (CMS) Approval of South Carolina's Request to Enroll Women with Health Insurance in the Family Planning Waiver (FPW)
 - II. Family Planning Waiver (FPW) Billing Reminders
 - I. Centers for Medicare and Medicaid (CMS) Approval of South Carolina's Request to **Enroll Women with Health Insurance in the Family Planning Waiver (FPW)**

CMS has approved the request of South Carolina Department of Health and Human Services (DHHS) to amend its FPW. Effective July 1, 2010, the FPW has been amended to allow females that have health insurance to enroll in the FPW demonstration project and receive services included in this FPW. The standard rules regarding third – party liability must be followed.

As before, women who are losing Healthy Connections coverage 60 days after a pregnancy and who are not eligible for full Medicaid coverage or CHIP may be enrolled in the FPW.

II. Family Planning Waiver (FPW) Billing Reminders

All approved codes can be found in the Physicians Provider Manual or the Medicaid Enhanced Services Manual, Section 4.

Diagnosis Code in the V25 series along with the 0FP modifier

Providers are reminded to use a diagnosis code in the V25 series and approved procedure codes with the 0FP modifier on each line of the CMS1500 when filing claims for FPW beneficiaries (category 55). Claims must have both the V25 series diagnosis code and approved procedure code with the 0FP modifier.

Initial Antibiotic Treatment of Sexually Transmitted Infection (STI)

If any of six specific STIs are identified during an initial or annual family planning evaluation/management visit, one course of antibiotic treatment from the approved drug list may be billed per calendar year under the FPW. The six covered STIs are syphilis, chlamydia, gonorrhea, herpes, candidiasis, and trichomoniasis. Providers must add an approved STI diagnosis code on the pharmacy prescription.

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When billing the claim, a diagnosis code in the V25 series must be the primary diagnosis and the STI diagnosis code must be the secondary diagnosis code. Any copayments for the medications will be the responsibility of the patient.

For additional information on this or other policy updates, please refer to the <u>Physicians</u>, <u>Laboratories</u>, <u>And Other Medical Professionals Provider Manual</u> or <u>Medicaid Enhanced Services</u> <u>Manual</u>. The most current version of the provider manuals are maintained on the SCDHHS website at <u>www.scdhhs.gov</u>.

If you have any questions regarding this bulletin or any other Medicaid billing or policy questions, please contact your Program Representative in the Division of Medical Support Services at (803) 898-2655. Thank you for your continued support and participation in the South Carolina Medicaid Program.

/s/

Emma Forkner Director

EF/mhpw

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